


Typed or Printed Name of Person Signing Certificate

Applicant : Timothy S. Farlow
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Please direct all communications regarding the application to the attorney at the address and telephone numbers indicated below.

David L. Feigenbaum
FISH & RICHARDSON P.C.
225 Franklin Street
Boston, MA 02110-2804
Telephone: (617) 542-5070
Facsimile: (617) 542-8906

Signature: 
Typed name: Peter C. Schilling
Title: Chief Technology Officer
Assignee: Authoria, Inc.

DLF/lja

Fish & Richardson P.C.
225 Franklin Street
Boston, MA 02110-2804
Telephone: (617) 542-5070
Facsimile: (617) 542-8906

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